August 20, 2018

Gail Burd, Ph.D.
Vice Provost for Academic Affairs
University of Arizona
Administration Building Room 712
1401 East University Boulevard
PO Box 210066
Tucson, AZ 85721-0066

Dear Vice Provost Burd,

At its meeting on July 19-22, 2018 the Commission on Accreditation (CoA) conducted a review of the doctoral Ph.D. program in Clinical psychology at the University of Arizona. This review included consideration of the program's most recent self-study report, the preliminary review ("admin review"), the program's response to preliminary review, the report of the team that visited the program on April 9-10, 2018, and the program's response to the site visit report.

I am pleased to inform you that the CoA voted to reaffirm accreditation of the program, with its next site visit scheduled to be held in 2028. This decision is based on the CoA's professional judgement that the program has demonstrated that it adheres to the Standards of Accreditation in Health Service Psychology (SoA). The current record indicates that a full review of the program is warranted within 10 years of the last site visit, including interim reporting, to ensure continued adherence to the Standards. The program will be listed among accredited programs in health service psychology on the accreditation web pages. The Commission encourages you to share information about your program's accredited status with agencies and others of the public as appropriate.

Drs. Gene D’Angelo, Emil Rodolfa, Stephen McCutcheon and David Smith recused and therefore did not participate in the discussion and vote on your program.

The Commission recognizes the quality of training provided by the program and deems it in substantial compliance with the Standards of Accreditation. The Clinical psychology program at the University of Arizona "follows a clinical science training model in which [it applies] the science of human behavior and behavior change to the amelioration of psychopathology and others forms of psychological impairment as well as to the promotion of health and wellness" (self-study [SS], Standard I.A.1). The program’s curriculum and student outcomes are consistent with its aims. The program collects both proximal data (current students) and distal data (alumni) that inform ongoing self-evaluation and programmatic changes, as needed. Through its successful recruitment and retention efforts, the program contains a diverse student body. As students progress through the program, they are supported, supervised, and educated by well-
qualified faculty. The program maintains good communication with the Commission on Accreditation and is current in its payment of accreditation fees.

Accreditation is a process that encourages improvement through continuous self-study and review. The following items represent areas that require additional attention. Please note that you will also receive this feedback online via the CoA Portal.

**Standard I: Institutional and Program Context**

**I.D.I:**

The program’s Evaluation and Retention Policy, which is accessible on its website, describes the steps taken by the program to inform and track students put on a remediation plan, but it is unclear whether the program provides written notification of the extent to which remediation efforts were or were not successful. Per Standard III.C.3.c of the SoA, programs are expected to provide substantive, written feedback on the extent to which corrective actions have or have not been successful in addressing the issues of concern. While site visitors noted reviewing such information in remediation plans (site visit report [SVR], Standard III.C.3), it is unclear if the program has a formal policy that requires written notification be provided on the effectiveness of the remediation plan. By **September 1, 2019**, the program is asked to clarify its policy for providing written notification to students about whether remediation efforts were or were not successful in addressing behaviors of concern, consistent with Standard III.C.3.c of the SoA.

**Standard II: Aims, Competencies, Curriculum, and Outcomes**

**II.B.1.a:**

In the program’s discipline-specific knowledge (DSK) Table (Appendix II.B.1.a.1.1), it states that the DSK area of affective aspects of behavior is covered primarily in PSYC 696c: *Cognitive and Affective Bases of Behavior*, with additional coverage of affective content infused in several other courses. However, it is unclear whether the additional courses that infuse affective content are required courses or if PSYC 696c may be used by itself to cover affective aspects of behavior. By **September 1, 2019**, the program is asked to clarify how it provides coverage of affective aspects of behavior. The program is also asked to provide all relevant course syllabi with its response.

The syllabus for PSYC 621/694a: *Clinical Assessment* refers to a separate syllabus for PSYC 694a for the practicum portion of the course that covers “the background, administration, and interpretation of specific assessment instruments” (Appendix II.B.2.1.1, p. 117). However, the program did not provide a syllabus for PSYC 694a in its self-study. As the program’s DSK Table (Appendix II.B.1.a.1.1) lists PSYC 694a as a required course for the DSK area of psychometrics, the program is asked to provide a syllabus for PSYC 694a by **September 1, 2019**.
II.D.1.a:

The program provided its Clinical Competency Assessment Tool (Appendix II.D.1.a.1.1), but it is unclear which assessment items map onto which profession-wide competencies (PWCs) and their respective elements. Table 2 (Appendix II.B.1.b.1.1) does not indicate which assessment items are used to determine if the student has attained the MLA specified for each competency area. By September 1, 2019, the program is asked to clarify which assessment items from its Clinical Competency Assessment Tool are used to evaluate students’ development of each PWC.

Standard V: Communication Practices

V.A.1:

Throughout its self-study and public materials (e.g., website), the program uses language that is consistent with the Guidelines and Principles (G&P) of accreditation (e.g., goals, objectives, etc.). As of January 1, 2017, the Standards of Accreditation (SoA) were established. In its next self-study, the program is reminded to ensure that its self-study, public materials, and other documents are consistent with the current SoA.

The program is reminded that consistent with IR C-26 D, the program must provide information in its public materials regarding trainee admissions, support, and outcome data. Please note that the program’s public information will be reviewed on or after October 1 of each year to ensure that the disclosure data has been updated and is in compliance with the IR.

The program’s response to the Reporting Requirements listed above should be submitted in the online CoA Portal. The program should navigate to the “Follow-Up” tab to respond by the designated due date.

All Implementing Regulations referenced in this letter are available on the accreditation website (www.apa.org/ed/accreditation). The website also provides important updates and policy changes related to the accreditation process. As an accredited program, we encourage you to periodically visit the website to remain current on all new accreditation policies. The Commission on Accreditation would also like to remind you that all accredited programs must inform the accrediting body in a timely manner of changes that could alter the program’s quality. A copy of Implementing Regulation C-27 D (Notification of Changes to Accredited Programs) is attached for your information. Such updates should be submitted via the CoA Portal under the “Substantive Change” tab.

In closing, on behalf of the Commission on Accreditation, I extend congratulations to the faculty and students of the program for their achievements. The Commission also expresses its appreciation for your personal commitment, and the corresponding support of your administration, to develop and maintain the best possible quality of graduate education and training in psychology. If the Office of Program Consultation and Accreditation may be of service at any time on administrative matters of accreditation, please call upon us.
Sincerely,

Jacqueline Remondet Wall, Ph.D.
Director, Office of Program Consultation and Accreditation

cc:  Joaquin Ruiz, Ph.D.; Dean, College of Sciences
     Lee Ryan, Ph.D.; Head, Department of Psychology
     David Sbarra, Ph.D., Director of Clinical Training
C-27 D. Notification of Changes to Accredited Programs
(formerly C-19; Commission on Accreditation, February 2005; revised October 2006, November 2015)

In accordance with Standard V.B.2 of the Standards of Accreditation (SoA) and Section 8.7 D of the Accreditation Operating Procedures (AOP), all accredited programs whether under a single administrative entity or in a consortium, must inform the accrediting body in a timely manner of changes that could alter the program’s quality.

The Commission on Accreditation (CoA) must be informed in advance of major program changes such as changes in degree offered, policies/procedures, administrative structure, faculty resources, supervision resources, area of emphasis, or tracks/rotations. In the case of doctoral programs, this includes changes in the areas of emphasis.

Programs must submit to the Office of Program Consultation and Accreditation a detailed written description of the proposed change(s) and the potential impact upon the relevant accreditation standards. The CoA will review the program change(s) and may request additional information or a new self-study. In the case of a substantive change (such as a change in consortium membership), the Commission may also determine that a site visit is needed to assess whether the revised program is consistent with the SoA. Upon completion of this review, the Commission will note the proposed change and include the information in the next scheduled review or inform the program of any needed immediate additional actions.

The only exception to the policy of informing the Commission in advance is the occurrence of an unavoidable event beyond the reasonable control and anticipation of the program (e.g., educational/training site unexpectedly withdrawing from a consortium because of financial crisis; resources affected by a natural disaster). In such circumstances, it is incumbent upon the program to immediately inform the CoA in writing of the change and to include in its notification a proposed plan for maintaining program consistency with the SoA. The CoA will then proceed as above.

Consultation on program changes is available from the Office of Program Consultation and Accreditation.